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APPLICANTS  
 Gregory A. Shteyngarts, Solon, OH;

\*\* CONTINUING DATA .....  
*NONE*

\*\* FOREIGN APPLICATIONS .....  
*NONE*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 05/31/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged Examiner's Signature: <i>Att</i> Initials: <i>ga</i>	STATE OR COUNTRY OH	SHEETS DRAWING 3	TOTAL CLAIMS 26	INDEPENDENT CLAIMS 5
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ADDRESS  
 WATTS, HOFFMANN CO., L.P.A.  
 Ste. 1750  
 1100 Superior Ave.  
 Cleveland, OH  
 44114

TITLE  
 Knife-like cutting die

FILING FEE  RECEIVED 525	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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